

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		4-7-00
O.I.P.E. CLASSIFIER			4-11-00
FORMALITY REVIEW	YC	700.2	6-15-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original
1	01/12/00
2	01/12/00
3	01/12/00
4	01/12/00
5	01/12/00
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8	01/12/00
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50	01/12/00

Claim	Date
Final	Original
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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